

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
ORM LIMITED OFFERING EXEMPTION

19 0	124	JX				
OMB	APPROVAL					
OMB Num	ber: 32	35-0076				
Expires:	April 30,	2008				
Expires: April 30,2008 Estimated average burden						
hours per response 16.00						

SEC U	SE ONLY
Prefix	Serial
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DATE	RECEIVED
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V UNIFORM LIMITED OFFERING EXEM	PIION L	
Name of Offering (check if this is an amendment and name has changed, and indicate change.)		
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6	ULOE	
Type of Filing:		16)))
A. BASIC IDENTIFICATION DATA		
Enter the information requested about the issuer		
		07087822
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)		0.00/022
Arcanum Equity Fund LLC	T-lb Nob	(Including Assa Code)
Address of Executive Offices (Number and Street, City, State, Zip Code) 11316 Harriers Place, Bradenton, FL 34212	941-527-1417	per (Including Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	 	ber (Including Area Code)
(if different from Executive Offices)		, and the second second second
Brief Description of Business		
The buying and selling of investment grade securities.		ROCESSED
Type of Business Organization	14/	JAN 0 7 2008
	please specify):	JAN O I ZOOO
business trust limited partnership, to be formed		THOMSON
Month Year		FINANCIAL
Actual or Estimated Date of Incorporation or Organization: OT OT Actual Esti Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State		
CN for Canada; FN for other foreign jurisdiction)		
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 77d(6).	or Section 4(6), 17 CF	FR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given by which it is due, on the date it was mailed by United States registered or certified mail to that address.	. A notice is deemed clow or, if received a	filed with the U.S. Securities at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	1549.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual photocopies of the manually signed copy or bear typed or printed signatures.		s not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously support be filed with the SEC.	ort the name of the iss lied in Parts A and B.	suer and offering, any changes Part E and the Appendix need
Filing Fee: There is no federal filing fee.		
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for subJOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the sare to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrate the exemption, a fe	ator in each state where sales
ATTENTION	-	
Failure to file notice in the appropriate states will not result in a loss of the federal examples appropriate federal notice will not result in a loss of an available state exemption unla filing of a federal notice.	kemption. Conve ess such exemptio	rsely, failure to file the in is predictated on the

				A. BASIC II	DENTI	FICATION DATA				
2. Enter the in	nformation re	quested for th	e followi	ng:				<u> </u>		
• Each	• Each promoter of the issuer, if the issuer has been or anized within the past five years;									
• Each	The state of the second st									
• Each	executive off	icer and direc	tor of corp	porate issuers and o	of corpo	rate general and ma	naging	partners of	f partne	ership issuers; and
• Each	general and n	nanaging parti	ner of par	tnership issuers.						
Check Box(es) t	hat Apply:	Promot	er 📝	Beneficial Owner		Executive Officer	Ø	Director	Ø	General and/or Managing Partner
Full Name (Last St. Jean, Dale	•	f individual)								
				t, City, State, Zip (berta T3H 4Y2		ta				
Check Box(es) t	hat Apply:	Promot	ter 🗾	Beneficial Owner	Z	Executive Officer	Z	Director	Z	General and/or Managing Partner
Full Name (Last Buckhannon,		•					-			
Business or Res	idence Addre	ss (Number	and Stree	t, City, State, Zip (Code)					
4464 Bay Ced	ar Lane, Sa	rasota, FL 3	14241							
Check Box(es) t	hat Apply:	Promot	cr 🔼	Beneficial Owner	Z	Executive Officer	Z	Director	Z	General and/or Managing Partner
Full Name (Last Rawstern, Ph		f individual)								
		,		t, City, State, Zip (Code)					
11316 Harrier	s Place, Bra	denton, FL	34212			· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·
Check Box(es) t	hat Apply:	Promot	er 🔽	Beneficial Owner		Executive Officer	Z	Director	Z	General and/or Managing Partner
Full Name (Last	•	f individual)					•	<u></u>		
Tinsdal, Grego	<u>-</u>	· · · · · · · · · · · · · · · · · · ·								
		-		t, City, State, Zip (berta T3H 4Y2		da				
Check Box(es) t	hat Apply:	Promot	ег 🗍	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last	name first, i	f individual)			·			. <u> </u>		
Business or Resi	idence Addre	ss (Number	and Stree	t, City, State, Zip (Code)					
Check Box(es)	hat Apply:	Promot	er 📋	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last	name first, i	f individual)					• • • • • • • • • • • • • • • • • • • •			
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) t	hat Apply:	Promot	er 📗	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last	name first, i	f individual)						<u>.</u>		
Business or Resi	idence Addre	ss (Number	and Stree	t, City, State, Zip C	Code)		-			
		(Use	blank sh	cct, or copy and use	c additi	onal copies of this s	hcet, a	is necessary	·)	

					B. 1	NFORMAT	ION ABOU	T OFFERI	NG				
	,				. 1	11 41			this offer	in o')		Yes	No □
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.										E		
2.											s 100	0,000.00	
											Yes	No	
3.											K		
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful	! Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, Z	Zip Code)						
Nar	me of As	sociated Bi	roker or De	aler						-			
Sta	tes in WI	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)							☐ Al	I States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	: Address (Number an	d Street, C	ity, State,	Zip Code)				<u> </u>		
Nar	ne of As	sociated Bi	oker or De	aler									,,,,,,,
Sta	tes in WI	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)							□ A1	I States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Ful	l Name (Last name	first, if ind	ividual)									
Bus	Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers									· · · · · · · · · · · · · · · · · · ·				
(Check "All States" or check individual States)									l States				
IL IN IA KS KY LA ME MD MA MI MN I MT NE NV NH NJ NM NY NC ND OH OK								MS OR WY	MO PA PR				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount alread sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	K	
	Type of Security	Aggregate Offering Price	Amount Aiready Sold
	Debt	s 500,000,000	0.00
	Equity	· · · · · · · · · · · · · · · · · · ·	\$ 0.00
	Common Preferred		0.00
	Convertible Securities (including warrants)	. \$	s 0.00
	Partnership Interests		\$ 0.00
	Other (Specify)	500 000 000	
	Total	\$ 300,000,000	.00 8 0.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicat the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	c	Aggregate
		Number	Dollar Amount
		Investors	of Purchases § 0.00
	Accredited Investors		
	Non-accredited Investors		
	Total (for filings under Rule 504 only)		. <u>\$</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities old by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	·	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure i not known, furnish an estimate and check the box to the left of the estimate.	e	
	Transfer Agent's Fees	Г] \$
	Printing and Engraving Costs	_	
	Legal Fees	_] \$
	Accounting Fees	_	
	Engineering Fees	-	-
	Sales Commissions (specify finders' fees separately)	<u> </u>	
	Other Expenses (identify)	_) \$
	Total		\$ 0.00
		L	J •

	C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — C proceeds to the issuer."	ng price given in response to Part C — Question 1 Question 4.a. This difference is the "adjusted gross		\$
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[\$ <u>0.00</u>	□ \$ <u>0.00</u>
	Purchase of real estate	[s0.00	□ \$ 0.00
	Purchase, rental or leasing and installation of mach	ninery	¬ \$ _0.00	s_0.00
	Construction or leasing of plant buildings and faci	lities	\$ 0.00	s 0.00
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asset issuer pursuant to a merger)	e of securities involved in this		s
	Repayment of indebtedness			s 0.00
	Working capital		_	s 0.00
	Other (specify):		\$_0.00	\$ 0.00
			ss	so.oo
	Column Totals			s 0.00
	Total Payments Listed (column totals added)			.00
		D. FEDERAL SIGNATURE		
sig	s issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furrinformation furnished by the issuer to any non-accr	nish to the U.S. Securities and Exchange Commis	sion, upon writte	
lss	ter (Print or Type)	Signature	Date	
Ar	canum Equity Fund LLC	Hat D	11/26/2007	
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)	-	
Rol	ert L. Buckhannon DC	Managing Member		

ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

